



U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received: 27-MAR-2009
Repository:
Reference No.: 10263283

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: LONGVIEW State: TX Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address:
Evening Telephone Number:

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 4/1/2009

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GDDM19Z0ME [REDACTED]
Make: GMC Model: SAFARI Model Year: 1991
Date Purchased: 02/2/09 Dealer's Name and Telephone Number:
Original Owner: Dealer's City: State: Zip Code:
Engine: No: Cylinders: 6 Fuel Type: Gas
Transmission Type: Antilock Brakes Powertrain: Multiple Failure: Brake Sensor Failure
 Cruise Control Incident Date(s): 16-JAN-2009

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC
Anti Lock Brake System
Failure Mileage: 174000 Failure Speed: 0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: Tire Model (Name or Number): Tire Size (Example P215/65R15):
DOT No. (Example: DOTM9ABC036) Original Equipment Prior Repair Failure Location:
Tire Component Code: Tire Failure Type:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: Date Manufactured: Model No./Name:
Seat Type: Installation System:
Child Seat Component Code: Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: 0 Number of Deaths: 0 Reported to Police: N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

TL*THE CONTACT OWNS A 1991 GMC SAFARI. THE CONTACT NOTICED THAT THE ABS WARNING INDICATOR CONSISTENTLY ILLUMINATES ON THE INSTRUMENT PANEL. SECONDLY, WHEN APPLYING PRESSURE TO THE BRAKE PEDAL, THE VEHICLE SKIDS. HE IS IN THE PROCESS OF NOTIFYING A DEALER IN REFERENCE TO THE FAILURES. THE FAILURE MILEAGE WAS 174,000 AND CURRENT MILEAGE WAS 175,000.

Don't know exact date or mileage of Failure was already Failed at purchase date

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.